

Newark, New Jersey

Historical overview

Newark is located within easy travel, albeit often congested, distance of New York City in northern New Jersey. Newark was mostly farmland until the early 19th century when the industrial revolution transformed it into a manufacturing hub (Turner & Koles, 2001). The population of Newark grew as the demands for manufacturing increased bringing in waves of immigrants, first the Irish and later Germans (Turner & Koles, 2001). With the start of World War I, war-related industry drove the demand for labor even more and there was an influx of African Americans from the South with a third of Newark's population African American by 1960 (Turner & Koles, 2001).



IMAGE: Peddie Memorial Baptist Church (Courtesy of Matt Gosser)

Newark experienced economic downturns first with the Great Depression which hit Newark's businesses hard and prompted an exodus of people who could afford to move. This was intensified in the aftermath of political turmoil in the 1960s leaving behind pockets of concentrated poverty. Businesses moved out or closed down which led to very high unemployment rates (Turner & Koles, 2001). Although after the end of World War II the US economy rebounded, it was the suburbs around Newark that benefitted the most from the economic upswing (Boudless.com, 2017). Massive investment in infrastructure and housing facilitated by zoning laws and strengthened of the mortgage market benefitted the suburbs (Boudless.com, 2017). Urban areas, like Newark, were considered a poor financial risk and policies like redlining led to disinvestment in the center city. This led to hypersegregation, a form of racial segregation characterized by geographical grouping of racial groups, of African

Americans, particularly those living in poverty in urban areas including Newark (Boudless.com, 2017).

IMAGE: Hahne's Building Before Redevelopment (Courtesy of Matt Gosser)



Socio-demographics

By 2015 the population of Newark was 279,793, maintaining its status as the largest city in New Jersey. Population loss had stabilized and the net migration rate was positive (1.7%). Much (48%) of the population was African American, the second largest group (36%) was Hispanic while 11% were White. Approximately 29% of the population was foreign born. The population was evenly split between males and females. Nearly 29% were under the age of nineteen, while 9% of the population was over 65 years of age. The median age was 32 years old (Census, 2015).

In addition, there is a large population which is transient. With seven regional and national corporations' offices and an international airport located in Newark, the daytime population (commuters) increases by 55,825 (+19.8%) people (citydata.com, 2015). In addition, there are campuses of six universities/colleges in Newark which serve approximately 15,000 students who reside in or commute to Newark (citydata.com, 2015).

IMAGE: New Jersey Institute of Technology (Courtesy of Matt Gosser)



Social and Community Context

There were 92,675 households, 63% of which were family households. The average family size was 3.6. Of these 39% were families with children under 18 and 20% with people over the age of 60. The most prevalent types of families were comprised of couples (26%), mothers alone (17%) and fathers raising children by themselves (4%). Others included single individuals with no children. There were many grandparents (36%) responsible for grandchildren who were under 18 years of age; 82% of whom were females. Half of population had never been married (Census, 2015).

The population is quite diverse and includes people from Europe, Asia, Africa and Latin America. The largest (4.2%) were Sub-Saharan African, 3.9% Portuguese, and 3% West Indian.

Economic Stability

In 2015, half (51%) of Newark's population was employed and the median household income was \$33,139. Compared to the median income, \$72,222, of New Jersey overall this was almost half. The unemployment rate was 18.4% and 30% lived below the federal poverty line. Different neighborhoods differ by socio-economic factors; areas such as University Heights have the highest median income with 72% employment and 54% of the population educated at the bachelor's level. Areas of low socio-economic status, Lincoln Park, have lower employment rates (44%) and education (6% with bachelor's degrees).

Children in Newark fare worse than the general population with 69% living in low income households and with 18% living in extreme poverty. According to one estimate 25% of children in Newark are food insecure (Brownlee, 2010). Most public school students (74%) qualified for free lunch prompting the school system to offer free breakfast to all students recently (Thomas, 2017).

Many Newark's households, 57%, spend more than 30% of their household income on rent. Essex County, of which Newark is part of, has the most homeless residents in New Jersey. The homeless counted in Essex County are mostly African-American, more than 80% and 22.5%

are children under the age of 18. The principal reasons for homelessness here are in rank order: asked to leave shared residence, eviction, and released from prison or jail.

Education

Early childhood development and education is occurring in Newark. Per the State of New Jersey Early Intervention Services 2014 report, there were 76 Newark children enrolled in early intervention services by age 12 months, 100 children enrolled by age 24 months, and 700 enrolled prior to their third birthday. There were 6,404 Newark children enrolled in public preschool in 2012–2013 (ACNJ, 2014). In 2011–2012, the Newark preschool enrollment included 3-year-olds (46%) and 4-year-olds (54%). Approximately 82% of the children were in community classrooms such as child care centers, with approximately 18% educated within school district classrooms (ACNJ, 2013).

Newark has enormous literacy challenges in its school-age population as well as for adults. According to City of Newark Read and Believe (2015) more than half of all students (56%) are not proficient on standardized literacy tests. Most (90%) of those children who are not proficient come from economically disadvantaged families. These literacy statistics place Newark in the bottom 6% of all school districts in New Jersey (Believe, 2015). Furthermore, a third (35%) of Newark’s adult residents had completed high school, however 14% reported a ninth grade education or less while 13% reported a bachelor’s degree or higher (Census, 2015).

More than half (53%) of Newark’s residents speak only English. Approximately 32% of residents over age five speak Spanish at home with more than half (52%) of those Spanish speakers reporting that they speak English less than “very well.” Portuguese is spoken at home by approximately 7.7% of residents and more than half (57%) of those Portuguese speakers report that they speak English less than “very well.” African languages are spoken at home by 2.4% of residents with 24% of those African language speakers reporting that they speak English less than “very well” (Census, 2015).

Health and Healthcare

Although most Newark residents (75%) had some kind of health insurance (Census, 2015), the burden of disease was high. According to the Behavioral Risk Factor Surveillance System (BRFSS) survey a third (33% N=468) of respondents had chronic hypertension, 15% Type II Diabetes while only 24% reported having had a routine medical exam in the last 12 months and 20% rated their health as 'poor' in 2015 (NJBRFSS, 2015). In one survey, nearly a third of the respondents rated the quality of life in Newark as positive, but another third rated it negative (SHCI, 2014). The rates of obesity and overweight were high, but among children between 3 and 11 years of age they were very high (45%-47% respectively) (Brownlee, 2010). Elevated blood lead levels are another concern among children under the age of six, where 15% of children tested positive in 2014, and the highest in the State of New Jersey (NJDHPS, 2014). With 1 in 32 African American residents affected Newark has one of the highest prevalence rates of HIV/AIDS (NJBRFSS, 2015). Rates of asthma were also high among both adults and children (NJBRFSS, 2015). The racial distribution of disease clearly indicated that the health of African American Newark residents was worse when compared to other groups. Approximately 18% of Newark residents are living with a disability, but for those 65 years or older the proportion was 50% (Census, 2015). Per 500 Cities data, 16.1 % of Newark adult residents report having "not good" mental health.

A 2015 evaluation of healthcare services in Newark found that there was surplus of inpatient beds, substantial duplication of services, few unique services, few ambulatory services, challenges to solvency, aging facilities, aging and unorganized physician population (NJHCFFA, 2015). Additionally, there was a high degree of fragmentation in the organization and delivery of healthcare. There were no formal relationships between hospitals and post-acute care providers, contributing to poor continuity of care after discharge (NJHCFFA, 2015).

Neighborhood and Built Environment

Newark's housing stock is one of the oldest in the region. In 2015, there were 109,520 housing units with 86% occupancy leaving many unoccupied and some abandoned properties.

Home ownership was low (22%) when compared with 78% who were living in rented homes (Census, 2015). Public housing included approximately 7000 units. Around 2008 Newark was impacted seriously by the crash of the housing market with numerous foreclosures and people losing their homes (SHCI, 2014). Foreclosure proceedings peaked in 2009, when a foreclosure was filed on one out of every 13 homes in the city (SHCI, 2014).

Newark has several thriving neighborhoods. The Census uses tracts to collect data but neighborhoods are spaces defined by social attributes that distinguish them from surrounding areas (Spielman & Logan, 2013). The 'ironbound' district, so named because it is bounded by railroad tracks, is composed of tracts with large immigrant, Hispanic and Portuguese populations. It has a cultural flair with ethnic restaurants and shopping.



IMAGE: New Jersey Performing Arts Center (Courtesy of Matt Gosser)

Crime is a serious concern in Newark. Although violent crime (includes murder, assault, rape, theft) rates have declined over the years, there were 9,065 incidents in 2016 (down 13% from 2015), it is still three times the national average per 100,000 residents (Moriarty, 2016). According to a 2014 report more people reported feeling safe inside their homes, but nearly



50% did not feel safe in the streets or public spaces (Hahn, 2014). Hearing gunshots (74%) and seeing drug deals (56%) in the neighborhood were common (Echeverria, Kang, Isasi, Johnson-Dias, & Pacquiao, 2014). Such factors contribute to low levels of physical activity even when people have access to parks.

IMAGE: Essex County Courthouse (Courtesy of Matt Gosser)

Although there are many supermarkets and convenience stores, fresh fruits and vegetables are in short supply and it is expensive to shop in Newark. In one survey nearly 50% of parents reported shopping for groceries in other vicinities and the top reasons were cost and quality of products (Brownlee, 2010). There are several fast food options available; 27 Dunkin Donuts, 10 McDonald's etc. (citydata.com, 2015).

Newark is a transit hub with Newark Liberty International airport, Pennsylvania Station, Greyhound, New Jersey Transit and Amtrak stations. It is surrounded on all sides by major



IMAGE: Dock Bridge (Courtesy of Matt Gosser)

regional highways (Newark, 2016). In addition there are three active superfund sites, a remnant of the city's industrial past (Newark, 2016). All these contribute to the poor air quality in Newark (Air Quality Index was 172 in July 2013, compared with 75 average nationwide) (citydata.com, 2015).

Approximately 39% of Newark households do not have access to a private vehicle. For one-person household, this percentage rises to 55%. Therefore, buses play an important role in transporting 24,000 residents or 74 percent of workers to jobs and subway stations. Of those workers taking public transportation, almost 71 percent earned less than the \$35,000 annually.

Newark is one of the most densely populated and park-poor urban centers in the United States. Newark has only 2.9 acres of parks per 1,000 residents. That acreage rate is two and a half times below the average for comparable cities. Over half of Newark's children do not have any significant green space within a quarter-mile of their homes. Newark has two parks designed by the celebrated 19th century landscape architect Frederick Law Olmstead: Weequahic Park and Branch Brook Park.



IMAGE: Branch Brook Park (Courtesy of Matt Gosser)

Psychological trauma may be initiated and reinforced by social and environmental factors; factors that are wide-spread in Newark. Poverty, discrimination, poor physical health, lower health literacy, crime and violence rates, air and water pollution, and a lack green space may contribute to the self-rated ‘poor’ health and negative ‘quality of life’ Newark residents experience. This may make Newark residents more vulnerable to trauma exposures and their impact. Symptoms of psychological trauma are many. With approximately 16 percent of Newark residents reporting ‘not good’ mental health, this issue is a vital one to address.

Social Determinants of Health in Newark

Social determinant	Underlying factors of influence	Factors in Newark
Economic stability	Unemployment, housing insecurity, food insecurity, and poverty	Unemployment rate 18.4% Child food insecurity 25% Below federal poverty line 30% Children in low income household 69% Children in extreme poverty 18%
Education	Early childhood education and development, high school graduation, language and literacy, and higher education enrollment.	High school completion 35% Students not proficient on standardized literacy tests 56% 9 th grade education or less 14%
Health and Healthcare	Access to health care, access to primary care, and health literacy	Health insurance 75% Few ambulatory services
Neighborhood and built environment	Access to healthy foods, quality of housing, crime and violence, and environmental conditions	Old housing stock Low home ownership Violent crime is 3X national rate Do not feel safe in the streets or public spaces 50% Three active SuperFund sites Poor air quality Acres of parks/1000 residents 2.9
Social and community context	Social cohesion, civic participation, discrimination, and incarceration	Mostly minority community Residential segregation

Newark: A Work in Progress

Institutions and community members have begun to address psychological trauma in Newark by considering social and environmental factors. Background information on psychological trauma may be found in the **Side Bar** that follows the case study references. Symptoms of emotional/psychological trauma may be found above in the **TABLE: Emotional/Psychological Trauma Symptoms.**

The Greater Newark Healthcare Coalition (<http://greaternewarkhcc.org/>) is working to establish care coordination, trauma screening and treatment, professional development, and data integration practices. The city of Newark through its Department of Health and Community Wellness (<https://www.newarknj.gov/departments/healthcommunitywellness>) operates a Federally Qualified Health Center. Besides primary health care, the clinics offer dental services, environmental health services, sexually transmitted infection services, and hospital diversion services. The Rutgers School of Nursing provides health and wellness services to high risk/high need areas in Newark through its mobile health van (<http://nursing.rutgers.edu/jhchc/>) and the FOCUS federally qualified health care clinic (<http://nursing.rutgers.edu/focus/>). Rutgers School of Nursing faculty are investigating the use of mindfulness and yoga training with preschoolers in a school setting. University Hospital in Newark offers services post discharge to assist patients and families who are physical trauma survivors to address social factors and has begun a hospital-based Violence Prevention Program. The Sanar Wellness Institute addresses gender-based violence. Equal Justice USA (<http://ejusa.org/>) is working with police and community members in Newark leading trainings on “Trauma Informed Responses to Violence: Newark Police/Community Training Initiative.” The Center on Law, Inequality & Metropolitan Equity hosted a Trauma-Informed Care Roundtable at the Rutgers School of Law-Newark, co-sponsored with the New Jersey Attorney General’s Office. Newark’s Office of Planning, Zoning & Sustainability is working to make the city a healthier and greener place including efforts targeting public art, riverfront revival, and superfund sites remediation.

Newark Case Study References

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